Effective on 12/08/2004.				Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Application Number 10/553,6				
				Filing Date 4/15/2004				
For FY 2009				Named Inventor	Brian John Higgins			
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name		Nkeisha J. Smith		
Carried States of the				Art Unit 3632				
TOTAL AMOUNT OF PAYMENT (\$) 737.00			Attorr	Attorney Docket 4623 - 053150		53150		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
FILING FEES SEARCH F Small Entity Small								
Application Type Fee	e (\$) Fee (\$		lll Entity Tee (\$)	Fee (\$)	Fee (\$)	Fees P	aid (\$)	
Utility 3.	30 82	540	270	220	110	-		
Design 22	220 110	100	50	140	70			
Plant 2	20 110	330	165	170	85			
Reissue 3	30 165	540	270	650	325	-		
Provisional 2	20 110	0	0	0	0	 		
							Small Entity	
Fee Description Fee (\$)							Fee (\$)	
Each claim over 20 (including Reissues) 52							26	
Each independent claim over 3 (including Reissues) Multiple dependent claims 390						110		
Total Claims - 20 or	HP Extr	a Claims Fee ((\$)	Fee Paid (\$)		390 Multiple De	195 ependent Claims	
29 - 22	=	7 x 26.0		182.00		<u>Fee (\$)</u>	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims - 3 or H	<u>IP</u> <u>Extr</u>	a Claims Fee	<u>(\$)</u>	Fee Paid (\$)				
3 - 3	=	0 x 0	=	0				
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under								
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)							<u></u>	
Other (e.g., late filing surcharge): 3 Months Petition for Extension of Time							555.00	
SUBMITTED BY								
Signature	Whan	1 h Chyn	Ro (A	egistration No. attorney/Agent)	28,498	Telephone 41	2-471-8815	
Name (Print/Type) Richard L. Byrne Date December 18, 2009								